

ICD10 Diagnosis Code Enhancement

Attention: Local Plan SD/MC Providers

STOP - Impact on You

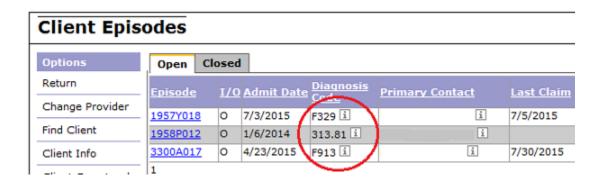
On September 28, 2015 the Los Angeles County Department of Mental Health implemented modifications to the Integrated System (IS) that allow providers to select the ICD-10-CM code in the User Interface (UI) on the EPIS screen for any diagnosis with a diagnosis date of October 1, 2015 or after. Claims with service dates equal to or greater than October 1, 2015 must have an ICD-10-CM diagnosis code reported on the claim. Along with this effort, a conversion process for Open Episodes with a "convertible" DSM-IV diagnosis code to an allowable ICD-10-CM diagnosis code was implemented in the IS to assist providers that submit their claims via Direct Data Entry (DDE). Electronic Data Interchange (EDI) providers must submit the ICD-10-CM diagnosis code on their EDI claim.



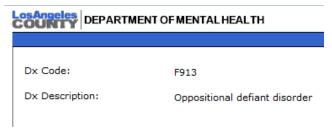
CAUTION - What You Need to Know

Client Episode Screen Displays New ICD-10-CM Code

If the DSM-IV code was converted to an ICD-10-CM code users will see the new code on the client episode screen. If the DSM-IV code was not converted, the DSM-IV code will display.

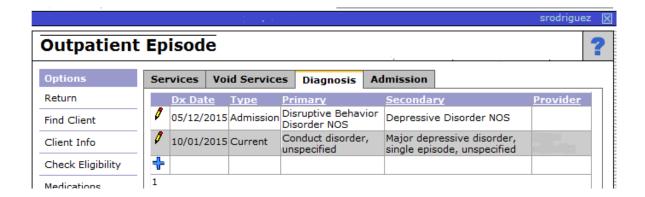


Selecting the by the diagnosis code displays the description.



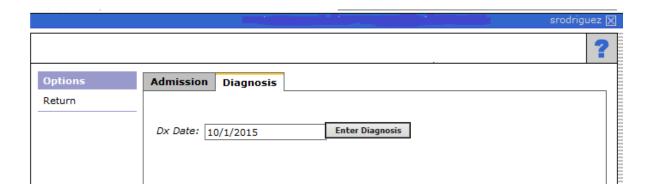
Provider Type Episode Screen with ICD-10-CM Description

The Outpatient, Inpatient, Day Treatment and Residential Episode screens will display the Primary and Secondary description with a Dx Date of 10/1/2015 for all diagnosis records that successfully converted to the allowable ICD-10-CM code. Note: In some cases, the Primary diagnosis was converted but the Secondary diagnosis was not converted.

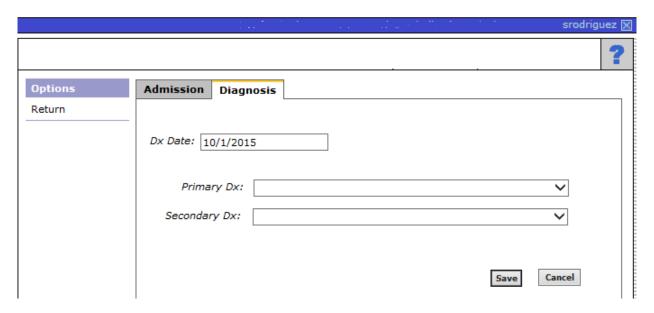


New Episode Diagnosis Screens

When you enter the Diagnosis Date, the IS determines whether to display the ICD-9 /DSM-IV existing screen or the new ICD-10-CM screen. If the Diagnosis Date is greater than or equal to 10/1/2015, it will display the new ICD-10-CM diagnosis screen.

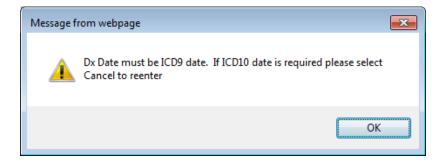


After you enter a date greater than or equal to 10/1/2015, the following screen displays to select the Primary and/or Secondary diagnosis code(s). Make your selection(s) and save.

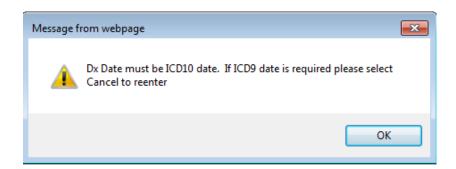


IS User Interface Errors/Pop-up Error Messages

 The IS displays the following pop-up error message if the Diagnosis Date was initially an ICD-9 and is changed to an ICD-10-CM date:

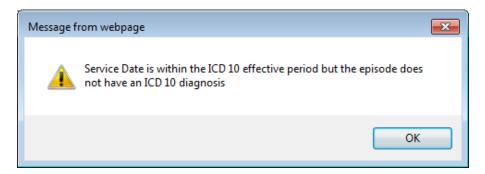


 The IS displays the following pop-up error message if the Diagnosis Date was initially an ICD-10-CM and is changed to an ICD-9 date:



• DDE/Direct Data Entry Claims Require the ICD-10-CM Code

 The IS displays the following pop-up error message on the claim screen, when the user is submitting a claim with a DOS that is within the ICD-10-CM effective period but the episode does not have an ICD-10-CM diagnosis code.



• EDI/Electronic Claims Require the ICD-10-CM Code

All EDI claims with service dates equal to or greater than October 1, 2015, require the ICD-10-CM Diagnosis code and qualifier. Please refer to the DMH HIPAA 5010 Companion Guides for specific instructions found at the following link.

http://lacdmh.lacounty.gov/hipaa/EDI_Guides.htm

Existing EDI IS Rule Denial for Invalid ICD10 Diagnosis/Qualifier

Attempting to submit an EDI claim with an ICD-9 code/qualifier after October 1, 2015 will be denied during inbound processing with a Deny Rule Failure: Inb837P.Post 9 or Inb837I.Post 10 Validate Diagnosis.

GO - What You Need to Do

For questions regarding the new edits and/or business rules in the IS, please contact the Help Desk at (213) 351-1335.

Please review the updated reference material:

 EDI Deny Reason Cheat Sheet. Click on the link below: http://lacdmh.lacounty.gov/hipaa/documents/DenyRuleCheatSheet.pdf

Please see previously released QA Bulletins regarding ICD-10-CM and DSM5. Click on the links below:

- ICD10 & DSM5 FAQs: http://file.lacounty.gov/dmh/cms1 230373.pdf
- ICD10 & DSM5 Updated FAQs: http://file.lacounty.gov/dmh/cms1 233471.pdf